	State of Rhode Island and Pro Office of the Secreta		Fee: \$50.00
	Division Of Business	Services	
148 W. River Street			
Providence RI 02904-2615			
HOPE	(401) 222-30	40	
Limited Liability Co	ompany		
Annual Report			
Filing Period: September	1 - November 1		
o file its annual report w	.L. 7-16-66(d), each limited liability com ithin thirty (30) days after the time presc a penalty fee of \$25.00.		
ANNUAL REPORT YEAR: 2016			
1. ID No. <u>000162799</u>			
2. Exact Name of the Limited Liability Company GI Associates Realty, LLC			
3. State of Formation			
State: <u>RI</u>			
Using the following NAICS codes, please select the code that best describes your business.			
NAICS Code 6			
NAICS Code <u>6</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
<u>REAL ESTATE</u>			
5. Principal Office Add	Iress		
No. and Street: 215 TOLL GATE ROAD, SUITE 201/202			
City or Town: WARWICK State: RI Zip: 02886 Country: USA			
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: RAYMOND MIS, DO Contact Title: PHYSICIAN			
	5 TOLLGATE ROAD	<u></u>	
	ARWICK State	: <u>RI</u> Zip: <u>02886</u> Cou	untry: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zi	p Code, Country
MANAGER	RAYMOND J MIS DO	215 TOLL GATE ROAD, WARWICK, RI 02886	SUITE 201/202
MANAGER	MOE AZZOUZ	215 TOLLGAT	

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

RAYMOND MIS, D.O. 215 TOLLGATE ROAD, SUITE 201 WARWICK , RI 02886

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 30 Day of November, 2016 at 7:05:33 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By <u>RAYMOND J MIS, DO</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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